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Applicant(s): Lynne Bigger et al. Docket No.: 40655.4200  
Serial No.: 09/924,025 Filing Date: August 7, 2001  
Group Art Unit: 2876 Examiner: Edwyn LaBaze  
TITLE: ONLINE CARD ACTIVATION SYSTEM AND METHOD

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By: *Alicia Respinosa*  
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AMENDMENT

Commissioner of Patents  
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Washington, D.C. 20231

Dear Commissioner:

In response to the Office Action dated March 26, 2004, please amend the above-identified application as follows.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 15 of this paper.

**Snell & Wilmer**  
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Applicant: Lynne Bigger et al. Attorney Docket No.: 40655.4200  
Serial No.: 09/924,025 Examiner: Edwyn LaBaze  
Filed: August 7, 2001 Group Art Unit: 2876  
Title: ONLINE CARD ACTIVATION SYSTEM AND METHOD

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Document(s): AMENDMENT TRANSMITTAL LETTER (Large Entity); AMENDMENT (16 pgs.)

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CONFIRMATION NO.: CLIENT MATTER NO.: 40644.4200  
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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. 40655.4200	
Applicant(s): Lynne Bigger et al.					
Serial No. 09/924,025	Filing Date 08/07/2001	Examiner Edwyn LaBaze	Group Art Unit 2876		
Invention: <b>ONLINE CARD ACTIVATION SYSTEM AND METHOD</b>					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	48 -	48 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	8 -	8 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-2814 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: June 25, 2004		
Lance L. Vietzke, Reg. No. 36,708 Snell & Wilmer LLP One Arizona Center 400 East Van Buren Phoenix, AZ 85004-2202 (303) 634-2017			<div style="border: 1px solid black; padding: 5px;">         I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22312-1450.       </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">         Signature of Person Mailing Correspondence       </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">         Typed or Printed Name of Person Mailing Correspondence       </div>		
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